

**FEE AUTHORIZATION and REQUEST FOR TIME EXTENSION**

A one-Month Extension of Time is hereby requested. If any additional time extensions are required, such time extensions are hereby requested. If any additional fees not submitted with this response are required, please take such fees from Applied Biosystems Deposit Account No. **01-2213 (Order No. 4944)**.

Respectfully submitted,

Date: August 29, 2008

*Andrew Finn*  
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